

METH

Our Nation's Crisis

• TOOLKIT FOR CHANGE •

A GUIDE FOR PARENTS

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About *Meth: Our Nation's Crisis*—Toolkit for Change

The content that follows contains the latest information about methamphetamine (meth). This material can help parents understand the drug's dangers and take action to prevent meth use, or to guide users to recovery.

This guide is part of a larger toolkit, *Meth: Our Nation's Crisis*, a comprehensive CD/DVD. The CD offers 170 pages of printer-friendly material including a *Meth Primer*, *Campaign Resources*, *Meth Resource Directory*, and five action guides for community leaders, schools, parents, employers, and health care professionals. The DVD presents three meth-prevention videos—*Meth: Shadow Across America*, *Life After Meth*, and *Walking on Thin Ice*.

To order the *Meth: Our Nation's Crisis* CD/DVD (Order # 2395), log on to www.hazelden.org/bookstore or call 800-328-9000 for more information.

About Hazelden Publishing and Educational Services

Hazelden Publishing and Educational Services is a division of the Hazelden Foundation, which pioneered the model of care for alcoholism and other drug addiction that is now the most widely used in the world. Today, with more than fifty years of experience and an unparalleled breadth of services, Hazelden is an international provider of treatment, research, education, training, and publishing. Visit www.hazelden.org for further information about Hazelden resources.

The Hazelden Foundation originally developed the following content in 2005 in conjunction with the Initiative Foundation (www.ifound.org). The material was subsequently revised and updated in 2006 for *Meth: Our Nation's Crisis*.

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A GUIDE FOR PARENTS

Meth: A Danger to Youth

A highly addictive stimulant that is relatively easy to manufacture, methamphetamine poses a grave danger to America's youth. It can quickly take over young lives and devastate families and communities. The good news is that meth use in teens has dropped recently, and recovery is possible for those who do use it.

Use This Guide to Talk to Your Children about Meth

Despite decreasing use in adolescents, continuing drug education is needed, because as young people become more exposed to drugs—through friends or mainstream media—they can become more callous to the dangers of drug use. As a parent, you can do many things to prevent your child from meth use or intervene if you suspect your child is using. You can also take action if you believe a child is being endangered by living with parents who use or make meth.

This guide offers many resources to help you address the issue of meth use with your children, including

- tools for having a straight talk about meth
- signs and symptoms of meth use

- reasons why adolescents use meth
- specific examples of what you can do to keep your children off meth
- tips for talking to children about drugs
- ideas on how to get your child's school involved
- additional resources for parents

As a parent or caregiver, you play a vital role in influencing your child's choices around the use of alcohol and other drugs. Research shows that children whose parents are involved in their lives—hold regular conversations, attend after-school events, and listen to their problems—are less likely to drink, smoke, or use illegal drugs. Your words and your example can make all the difference in your child's life.



If you suspect your child is using meth:

- Ask your doctor, a chemical dependency counselor, or your child's school counselor for confidential assistance.
- Consider contacting a school counselor, county social service agency, or reputable treatment facility to perform a chemical dependency assessment to see if your child is in danger.

Young People and Methamphetamine

Methamphetamine is a synthetic stimulant with a high potential for abuse and addiction. Meth contains, among many other things, anhydrous ammonia (a liquid fertilizer so corrosive it can burn the skin), red phosphorous (the chemical used in matches and road flares), iodine, battery acid, drain cleaner, and pseudoephedrine (an ingredient used in cold medication). So what would drive a young person to inhale or ingest this toxic substance? Immediately after taking the drug, meth users experience an intense, euphoric “rush,” followed by eight to twelve hours of high-energy behavior, during which they may not eat or sleep. In general, meth users take the drug for the intense euphoria it offers.

Who is using meth? Adults and youth. A recent Hazelden Foundation study found that 18.3 percent of those receiving treatment for meth in the Twin Cities area were seventeen or younger.¹ Adolescents may start using the drug to cope with working or studying for long hours; they hear that it will increase their energy and productivity. Young people, especially girls, may try meth for weight loss, and young men may hear that it will boost their sexual energy.

“If you saw meth on a kitchen counter—often a dirty-looking crystalline powder—you might mistake it for crumbs and just sweep it into the trash. Or you might kill for it. People on meth do crazy things.”

— Dirk Johnson, *Meth: The Home-Cooked Menace*

Meth can lead to irreversible brain damage, strokes, memory loss, psychotic behavior, heart damage, extreme anorexia, HIV transmission, cardiovascular collapse, and death. Users often develop ugly sores on their bodies from scratching at imaginary “crank bugs,” and their teeth and gums often deteriorate because of an awful condition known as “meth mouth.”

Meth Is Highly Addictive

Meth is extremely addictive because it enhances the user's mood and physical energy by releasing high levels of the neurotransmitter dopamine in the brain. Meth can quickly take over users' lives as they pursue incredible highs that are followed by overwhelming crashes—and then they desperately attempt to reattain the high. Experts say that it's not uncommon for youth to commit crimes that are out of character, such as stealing from family and friends, to get money for meth.

Will Your Child Try Meth?

Many teenage meth addicts say they started using it because of low self-esteem or poor body image:

- “When taking meth I felt powerful, like I could walk through walls.”
- “Meth made me feel skinny and attractive.”
- “I felt in control.”
- “I finally felt like I fit in.”

Many girls who have never smoked a cigarette or tasted a beer are attracted to meth because they want to lose weight and are told by friends, “Just smoke this and you'll lose ten pounds in a weekend.” In no time at all,

they end up addicted and anorexic. When young people first try meth, they feel that they could study or party endlessly without getting tired or hungry.

Too late, parents like Cassie Haydal's mother realize that they should have seen the warning signs and taken action. Cassie—a Montana honor student and youth basketball coach—had been taking meth for eighteen months before she collapsed and died. Looking back, her mother now sees that before her death Cassie had been losing weight, suffering from insomnia, picking at her face, and not washing her hair.

Ironically and tragically, young people use meth because they think it will make them more attractive, popular, and confident, but they soon discover it does just the opposite. Meth can emaciate and scar bodies, rot teeth, and cause brain damage, strokes, memory loss, and heart damage. It can induce paranoia and result in social isolation instead of the acceptance the users were seeking. Meth can make users angry and violent—and it can kill them.

While the statistics and stories surrounding use are frightening, parents cannot afford to stick their heads in the sand. Our sons' and daughters' health, and maybe even their lives, depend on our ability to explain the risks, to watch for the warning signs, and to know how to intervene, if necessary.

If you suspect your child is using meth:

- Ask your doctor, a chemical dependency counselor, or your child's school counselor for confidential assistance.
- Consider contacting a school counselor, county social service agency, or reputable treatment facility to perform a chemical dependency assessment to see if your child is in danger.

Is Your Child Using Meth?

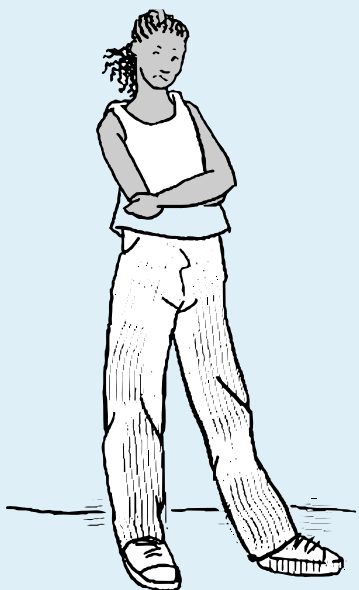
The following symptoms can indicate meth use:

- loss of appetite—extreme, rapid weight loss
- high energy level or restlessness
- talkativeness
- sores on skin from scratching at “crank bugs”
- insomnia
- paranoia
- dry mouth
- dilated pupils
- distorted auditory and visual perceptions
- repetitive motor activity
- declining performance at school, work, or home
- damaged relationships
- stealing and borrowing money from work, home, or friends
- secretive, defensive behavior about activities and possessions
- unusual mood changes
- abrupt temper outbursts
- switching to a different peer group
- deterioration in personal appearance and hygiene
- loss of interest in usual activities, pastimes, and hobbies²



Do Your Children Know the Truth about Meth?

In November 2005, ABC News reported the story of a high school student from a small Minnesota town who took her first snort of meth when she was fifteen years old. She said that it was the most incredible experience of her life. It allowed her to stay up all night working on a math project. She says that the "Just say no" messages aimed at teens don't always work.³



What You Can Do to Keep Your Children Off Meth

The good news is that parents do make a difference when it comes to their children and drugs. Our children do care what we think. Research shows that young people are less likely to use tobacco, alcohol, and other drugs if their parents set clear "zero tolerance, zero use" rules that insist on abstinence.

Studies have also shown that delaying the age of first alcohol or other drug use reduces the likelihood of developing substance abuse problems for a lifetime. Put another way, when it comes to alcohol and other drug experimentation and use, the earlier it starts, the worse it becomes. If a child is old enough to recognize words or images associated with alcohol and other drugs, that child is old enough to be educated about the damage drugs cause.

Most chemical dependency specialists agree that just saying "no" to young people about drugs is not saying enough. The U.S. Department of Education notes that to be effective, drug education should be provided in an age-appropriate way at each grade level throughout the year rather than only once during a special week.

Don't Put Off Talking to Your Children about Drugs

Although it might seem scary to raise the issue of drugs, talking about the dangers of meth will not "put ideas" into a child's head any more than talking about traffic safety might entice a child to drive recklessly. Chances are, your children have already heard about meth from classmates, school drug talks, or television news. When you talk about the dangers of meth and other drugs, you're reinforcing the "don't use" message.

In her book *Straight Talk: What Recovering Parents Should Tell Their Kids about Drugs and Alcohol*, leading addiction specialist Claudia Black urges parents to talk about alcohol and other drug abuse with their children when they are young, and continue to talk about it often.⁴ Among Black's key points:

- **Preschoolers** are old enough to grasp the fact that certain things are bad for them, and they are eager to please their parents. Let young children know that they are loved and that they are too wonderful and unique to use alcohol and other drugs. Play with your children at regular times each day and teach them about sharing and telling the truth so they begin to know that those behaviors are expected of them. Encourage children to be curious and ask questions, and nurture their problem-solving skills. Point out poisonous and dangerous substances, and explain that children should only eat food or take medicine that a trusted person, such as a parent or physician, gives them.
- **Children ages five to eight** can understand the concept of addiction—that some people take alcohol and other drugs out of curiosity and it becomes a behavior that they can't stop. Children of this age should be praised for taking care of their bodies and avoiding things that might hurt them. By the fourth grade, children should know that alcohol and other drugs are harmful to their developing bodies and brains. They should know that medicines prescribed by a doctor can help during illnesses, but that some prescription medications are addictive in nature and can be dangerous if misused.
- For **children ages nine to eleven**, friends are increasingly important. Because peers and older children will likely expose your children to alcohol and other drugs, it is vital that your children's opposition to drugs be strong. Children this age can handle more sophisticated discussions about drugs



When Should You Talk to Children about Drugs?

It's not enough to sit down for a onetime "drug talk" with your child. Instead, parents need to point out the dangers of alcohol and other drug use repeatedly as their children grow up. Just as you tell a young child not to accept candy from strangers and to look both ways before crossing the street, you need to offer drug and alcohol messages that fit with the age of your child. The key is to match the amount of information with the context of your child's questions and your child's maturity level. These topics often arise in the course of daily life—with the morning newspaper, TV commercials, billboards, or the nightly news. As parents, you need to take advantage of those opportunities to give your children clear messages in a natural, spontaneous way.⁵

and addiction, and you can use major traumatic events in people's lives (car accidents, divorces, arrests) to facilitate discussions. TV, movies, ads, songs, newspapers, and observations are all opportunities for "teachable moments."

Before leaving elementary or middle school, children should know the

- immediate and dangerous effects of alcohol and other drugs on the body
- long-term consequences of addiction
- problems that alcohol and other drugs cause the user, the user's family and friends, and society

- For **children ages twelve to fourteen**, structure and limitations are key. They should be given household responsibilities, enforced curfews, and clear rules about checking in with parents. Encourage open dialogue. Develop an "evacuation plan" that makes it easy for children to leave a party where alcohol and other drugs are being used. Discuss how your children will contact you or another previously designated adult to get a ride home. Make it clear that if they call, you will pick them up immediately. Make sure they know that their safety is your top priority.
- For **children ages fifteen to seventeen**, follow the suggestions above. In addition, set a "zero tolerance, zero use" rule for your children. Make the rules and consequences clear. To resist peer pressure, older teens need to be warned of the deadly effects of combining drugs; they need to hear about addiction; and they need to be reminded how alcohol and other drugs damage the brain and impair judgment, even in small doses. Because most high

school students are future oriented, they may find it compelling to know that drugs can ruin their chances of getting into a good college, being accepted by the military, or being hired for certain jobs.

Consider using the *Tips for Teens: The Truth about Methamphetamine* fact sheet at the end of this guide as a starting point for conversations.

Get Your Child's School Involved

Children have the best prospects for leading healthy, drug-free lives when schools support parents in their anti-drug message. There should be nothing confusing or contradictory in what children learn about alcohol and other drugs from the adults in their lives, and school policies need to reflect the same attitude that you express at home: drug use is not acceptable. Drugs diminish a child's ability to concentrate and follow through on academic responsibilities. They cause absenteeism and loss of motivation, and students who use them can be disruptive and drain teachers' time and energy.

According to the U.S. Department of Education, the best way to ensure that the anti-drug policies at your child's school are strong is to be involved:

- Learn about the school's current policies regarding alcohol and other drugs. If there is no anti-drug policy in place, attend parent volunteer or curriculum review meetings, or schedule an interview with the principal to help develop a policy. The policy should specify what constitutes an alcohol, tobacco, or other drug offense; spell out the consequences for failing to follow the rules; and describe procedures for handling violations.



Tips for Talking with Your Children about Alcohol and Other Drugs

While nothing can guarantee that your children will grow up drug and trouble free, establishing open and honest communication is one way to help build their resilience so they can better withstand the pressures of peers and society and make responsible choices. Follow these tips for communicating with your children about drugs:

- **Listen.** When you listen to your children, they will learn to be better listeners and will try harder to clearly express their thoughts and feelings. By attentively listening to children, you convey respect and concern.
- **Be flexible.** You can't force a child to communicate with you. Some children are more comfortable talking when they are in the car or doing dishes, rather than sitting across from you, face-to-face, with talking as the sole task at hand. Stay flexible and take advantage of the opportunities whenever and wherever they arise.
- **Be positive.** If most of your messages to your children are negative (like "Stop running in the house"), they may feel communication isn't worth it because they're always getting criticized. It is important, however, for children to know your rules and limits, and that there will be consequences if they break the rules.
- **Talk about your feelings.** Talk about your own feelings. When doing so with your children, it helps to say "I feel _____ because _____," which links emotions to thoughts and helps convey the reason for the feeling. Presenting your feelings this way also models clear communication to your children.
- **Establish clear rules and consequences.** Set clear limits regarding alcohol and other drug use (including tobacco) and communicate these expectations regularly with your children, focusing on their overall health and safety. If your message is inconsistent, your children may decide to create their own standards.

- Familiarize yourself with drug education in your child's school. Faculty members should be trained to teach about alcohol, tobacco, and other drug use. The school's program should be based on current research.
- Find out whether your child's school conducts assessments of its drug problem and whether these results are used in the school's drug education program.
- Ask what happens to those students who are caught using alcohol and other drugs. Does the school offer a list of referrals for students who need treatment?
- Investigate whether the drug program at your child's school is being evaluated for success. Research indicates that some of the most effective programs emphasize life skills such as coping with anxiety, being assertive, and feeling comfortable socially. When these lessons are combined with drug education, students confronted with drugs are better equipped to resist them.

Send Your Children Consistent Messages

When you talk to your children about drugs, be as consistent as possible, and be ready to stand behind the agreements you make with your children—especially those that deal with their protection and safety. Work with your children's teachers, therapists, or other qualified adults to develop action plans that your children can follow to stay safe when they are not in your care. Teach your children practical skills and precautions that will increase their resilience, not their paranoia.

A Parent's Communication Checklist

If your communication efforts repeatedly break down, ask yourself these questions, and then try again.

- ✓ Am I forgetting to listen to both facts and feelings?
- ✓ Do I have a tendency to jump to conclusions?
- ✓ Do I frequently give double messages? Are my words saying one thing and my body movements or actions saying something else?
- ✓ Am I expecting too much or too little from my child?
- ✓ Am I telling my child to do something without allowing her to have a say?
- ✓ Am I threatening my child by holding a punishment over his head?
- ✓ Am I "preaching" by telling my child what she "should" or "ought" to do?
- ✓ Am I lecturing by talking to my child, rather than with my child?
- ✓ Am I judging my child by criticizing him?
- ✓ Am I becoming angry or calling her names?
- ✓ Am I diverting or avoiding discussion by distracting my child from the problem at hand?

Tips for Preventing Youth Substance Use



- Set a reasonable time for your children to be home.
- Be awake and interact with them when they come home.
- Clearly and often tell your children your expectations that they not use. (Every time they go out!)
- Talk with them in advance about situations that may arise around alcohol, tobacco, and other drugs, and discuss ways to avoid uncomfortable situations.
- Reduce the easy accessibility of alcohol around your home. If you keep alcohol in your home, consider storing it under lock and key.
- Tell your children why you make the decisions you do about alcohol and other drugs, including tobacco and medications.
- Offer your children a safe ride home and be available if they call—no questions asked.
- Use teachable moments to convey accurate information about alcohol, tobacco, and other drugs.
- Get to know your children's friends and share your expectations about alcohol, tobacco, and other drugs with them. They will appreciate knowing you care about them.
- With your child, decide what the consequences will be should you have any evidence or suspicion of alcohol or other drug use. (If your intuition tells you something is wrong, it probably is. Trust your perceptions.)
- Get to know the parents of your child's friends. Develop common expectations that deal with alcohol or other drug use.
- Youth will often spend the night out if they plan to use. Know where your children are staying. Talk to the hosts and ask if alcohol or tobacco is allowed and to what degree the hosts plan to be involved and on-site.
- Tell your children in advance that you will be checking up. Then do it. Make sure they are where they say they are.
- If problems develop and persist in the face of consequences, do not hesitate to take your child for an assessment to find out what the problem is and how to remedy it.
- Set a good example regarding health and safety, including responsible use of alcohol.
- Provide an environment that empowers your children.

Meth Treatment Works

Treatment is one light at the end of the very dark tunnel of meth addiction: treatment does work, and it is a wise investment. Every dollar spent on treatment saves up to twelve dollars in health, social, and criminal justice costs.

Meth addiction *can be* and *has been* successfully treated. The Hazelden Foundation, a top addiction treatment center headquartered in Minnesota, compared recovering meth users with those recovering from other drug addiction. One year after residential treatment at Hazelden, all had similar rates of continuous abstinence and satisfaction with health and psychosocial functioning.⁶

The National Institute on Drug Abuse (NIDA) asserts that the most effective treatments for meth addicts are “cognitive behavioral interventions” designed to help modify a patient’s thinking, expectations, and behaviors, and to improve life coping skills. Effective treatment addresses medical, psychological, legal, social, and educational issues. As is true for all chemical dependency treatment, meth treatment works best when followed by mutual-support-group participation (such as Crystal Meth Anonymous, Narcotics Anonymous, or Alcoholics Anonymous) and a sober living environment.

The four components critical to recovery are

- intervention
- detox (getting off the drug)
- treatment (learning to live without drugs)
- continuing care (supported sober living)

Intervention: A Wake-Up Call

An intervention is a serious, caring conversation aimed at helping users see the consequences of their use. Often, several family members and/or friends conduct an intervention together, with or without professional help. If you find that your child is using meth, intervening can help guide him or her into treatment. But it is foolish to attempt an intervention while your child is under the influence of meth or in a psychotic state from sleep deprivation and paranoia. Success is most likely when the user is coming down from a “meth binge.”

In advance, those concerned might first discuss their thoughts with each other. Absent members might be asked to write a letter to the user, to be read aloud by another participant. When an appropriate time is found and all are gathered, one participant might begin by saying to the user, “I love you, and I care about you, but I’m concerned. These are the things I see happening to you.” Then each person in turn offers his or her own observations and feelings, ideally with examples. For instance, a sibling might say, “You went to see my basketball game, and everybody knew you had been using drugs. I was so embarrassed, and I was scared that something would happen to you.”

People do recover. People do mend.

An intervention should not last more than sixty to ninety minutes. It should always stress love and concern and avoid taking a negative, confrontational approach. Afterward you may want to schedule an evaluation with a chemical dependency professional to discuss treatment options.

Visit the Substance Abuse and Mental Health Services Administration (SAMHSA) Web page “Signs of Drug Use in Children” for warning signs and tips. Use the site’s searchable treatment facility locator to schedule an evaluation with a chemical dependency professional. The site is found at www.family.samhsa.gov/set/signs.aspx.



“When I talk to people about meth treatment, the most important point I want to make is that addiction is not about meth or cocaine or beer or heroin. It’s about the addict. My biggest fear is that the masses will start believing the fearmongers who want them to believe meth is so different from other drugs that people who are addicted to it can’t be successfully treated the same way other addicts are treated. Addiction is not about drugs; it’s about people. We don’t treat meth addicts or heroin addicts. We treat individuals, all of whom have their own story to tell and their own very unique set of circumstances to face.”

— Jim Atkins, Director of Admissions,
Hazelden

Hazelden Resources and Materials

The Hazelden Store offers books, videos, and other products on recovery, treatment, and prevention. Log on to www.hazelden.org/bookstore or call 800-328-9000 for more information. Resources for parents include the following:

Dangerous Drugs

**AN EASY-TO-USE REFERENCE FOR PARENTS
AND PROFESSIONALS, 2ND ED.**

by Carol L. Falkowski

Center City, MN: Hazelden, 2003

This book offers easy-to-understand profiles of common legal and illegal drugs of abuse; their effects on mind, body, and behavior; and their addictive and overdose potential. Includes color photos.

Helping Your Chemically Dependent Teenager Recover

**A GUIDE FOR PARENTS AND OTHER
CONCERNED ADULTS**

by Peter Cohen, M.D.

Center City, MN: Hazelden, 1991

This book empowers parents to help their teen recover, and to find their own personal relief from the pain of a child's chemical dependence.

How to Stop Enabling and Start Empowering Kids

Johnson Institute, 1997

This booklet in the Parenting for Prevention Information Series helps readers understand parental enabling and its hurtful effects. It offers tips on identifying common parental behaviors that lead to enabling and guidance on how to empower children instead.

Meth: The Home-Cooked Menace

by Dirk Johnson

Center City, MN: Hazelden, 2005

With staggering facts and up-to-the-minute information, this award-winning journalist has written the definitive book about America's methamphetamine pandemic. Johnson examines the unprecedented physical, mental, social, and environmental destruction caused by meth use and production.

Web Resources for Parents

American Council for Drug Education

www.acde.org

This site's fact sheet on meth gives a brief history of methamphetamine and lists the consequences of use. Also included are a drug quiz for youth, advice to parents for discussing substance abuse with their children, a list of symptoms of drug use, and other general information about drugs.

CrystalRecovery.com

www.crystalrecovery.com

Fast facts and photos, teen stories about meth, a question-and-answer board, and several community bulletin boards all support recovery for those with meth addiction.

A Family Guide to Keeping Youth Mentally Healthy and Drug Free

www.family.samhsa.gov

The Substance Abuse and Mental Health Services Administration (SAMHSA) offers guidance on raising healthy teens, including prevention and treatment of issues ranging from alcohol and other drug addiction to mental health concerns.

Hazelden Foundation

www.hazelden.org

800-257-7810

Hazelden pioneered the model of care for alcoholism and other drug addiction that is now the most widely used in the world. Today, with more than fifty years of experience and an unparalleled breadth of services, Hazelden is an international provider of treatment, research, education, training, and publishing. Its site offers a variety of resources for parents and schools, including tips for discussing alcohol and other drugs with young people, the signs of use, and information about Hazelden's Center for Youth and Families.

Just Think Twice

www.justthinktwice.com

In the style of a teen magazine, this Drug Enforcement Administration site has a section on meth with information about its forms and street names, the consequences of use (including pictures of the damage done to people's bodies), and stories about young users.

Mothers Against Meth-Amphetamine (MAMA)

www.mamasite.net

866-293-8901

MAMA was started in 2002 by Dr. Mary F. Holley to distribute her educational literature on meth and other drugs. This site offers pamphlets, study guides, T-shirts, and information on starting a Mothers chapter in any community.

Parents: The Anti-Drug

www.theantidrug.com

800-729-6686 (SAMHSA's National Clearinghouse for Alcohol and Drug Information)

Parents will find tips on communicating the dangers of drugs to their children and a link to subscribe to a monthly newsletter.

Tips for Teens: The Truth about Methamphetamine

In its various forms, meth has many names, including “speed,” “crystal,” “crank,” “tweak,” “go-fast,” “ice,” “glass,” “uppers,” and “black beauties.”

- **Meth affects your brain.** In the short term, meth causes mind and mood changes such as anxiety, euphoria, and depression. Long-term effects can include chronic fatigue, paranoid or delusional thinking, and permanent psychological damage.
- **Meth affects your body.** Over-“amping” on any type of speed is pretty risky. Creating a false sense of energy, these drugs push the body faster and further than it’s meant to go. It increases the heart rate, blood pressure, and risk of stroke.
- **Meth affects your self-control.** Meth is a powerfully addictive drug that can cause aggression and violent or psychotic behavior.
- **Meth can kill you.** An overdose can result in heart failure. Long-term physical effects such as liver, kidney, and lung damage may also kill you. In 2001, meth use sent more people to the emergency room than use of any other club drug. Over half of these cases involved meth in combination with another drug, such as alcohol, heroin, or cocaine.
- **Not everyone is using meth.** If you think all your friends are using meth, you might be wrong. In 2003, only 3.2 percent of twelfth graders reported having used methamphetamine.

How can you tell if a friend is using meth?

It may not be easy to tell. But there are signs you can look for. Symptoms of use may include

- inability to sleep
- increased sensitivity to noise
- nervous physical activity, like scratching
- irritability, dizziness, or confusion
- extreme anorexia
- tremors or even convulsions
- increased heart rate and blood pressure
- presence of inhaling paraphernalia, such as razor blades, mirrors, and straws
- presence of injecting paraphernalia, such as syringes, heated spoons, or surgical tubing

These tips are from the National Clearinghouse for Alcohol and Drug Information (NCADI), which offers free, valuable information on drug use and prevention. Contact NCADI at 800-729-6686 or at www.health.org.

Notes

1. “Methamphetamine-Related Treatment Admissions Increase in Metro Area,” Hazelden report, Jan. 18, 2005, available at www.hazelden.org/servlet/hazelden/cms/ptt/hazl_7030_shade.html?sf=t&sh=t&page_id=29555.

2. National Institute on Drug Abuse sources and Carol L. Falkowski, *Dangerous Drugs: An Easy-to-Use Reference for Parents and Professionals*, 2nd ed. (Center City, MN: Hazelden, 2003).

3. ABC News report, “Portrait of a Young Meth Addict: Teen Talks about Spiraling into Drug Addiction and Recovery.” Nov. 2, 2005.

4. Claudia Black, *Straight Talk: What Recovering Parents Should Tell Their Kids about Drugs and Alcohol* (Center City, MN: Hazelden, 2003).

5. Falkowski, *Dangerous Drugs*.

6. “Meth: A Dangerous, Addictive Drug Sweeps the Nation,” Hazelden “Alive and Free” column, Jan. 24, 2005, available at www.hazelden.org/servlet/hazelden/cms/ptt/hazl_alive_and_free.html?sh=t&sf=t&page_id=29556.